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3281
UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 248647US2S CONT

First Inventor or Application Identifier Koji SAKUI

Title SEMICONDUCTOR MEMORY DEVICE AND MEMORY SYSTEM

16834 U.S.P.T.O.
10/775068

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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification Total Sheets 24</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 2</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 2</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification or Sequence Listing on :</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> Paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copies</p>		<p>ACCOMPANYING APPLICATION PARTS</p> <p>7. <input checked="" type="checkbox"/> Assignment Recorded at Reel/Frame: 012610/0786</p> <p>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</p> <p>14. <input checked="" type="checkbox"/> Request for Priority</p> <p>15. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>16. <input type="checkbox"/> Other:</p>	
<p>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:</p> <p><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: 10/457,416 filed on June 10, 2003</p> <p>Prior application information: Examiner: LB, VU ANH Group Art Unit: 2824</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
18. CORRESPONDENCE ADDRESS			
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Docket No. 248647US2S CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Koji SAKUI

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SEMICONDUCTOR MEMORY DEVICE AND MEMORY SYSTEM

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	1 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
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			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$770.00
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- Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.
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Respectfully Submitted,

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